

City of Norfolk Department of Human Services FY2022 Human Services Grant (HSG) Program Application

General Information	n
Agency Name:	
Authorized Contact Person:	
Address:	
Phone Number:	
Agency Web Address:	
Email address:	
Authorized Application Contact :	
Phone Number:	
Email Address:	
Applicant is a:	EIN:
	Not-for-Profit/Registered to do Business in Virginia
	Government Agency
	Other (Please describe)
Program/Project Name:	
City Priority Addressed by this Application:	
Total Project Cost:	
Amount Requested from HSG Program:	

Agency Overview

1. **Organization Description:** Briefly describe the mission, history, and services of the applicant organization focusing on prior experience delivering similar activities to those being proposed. The applicant must demonstrate at least three years of prior experience. Include the prior fiscal year's operating budget as an attachment to the application.

Program Description and Measures

2. Problem and Need Statement: Describe the nature and scope of the problem to be addressed. Indicate which city program priority from Section IV of the FY22 HSG-RFP is being met. Include local data and recent statistics that support the need for the program and the anticipated impact the program will have on a person's quality of life.

3. Target Population and Area and Numbers to be Served:

Identify the target population and areas of the city where services are to be provided. As appropriate, include which specific neighborhoods, police precincts, and school zones will be reached. Include social, economic, and demographic characteristics of the population to be served. Clearly describe projected numbers of new individuals and/or families to be served by the proposed project in FY 2022. Estimate the number of participants remaining in the program from previous years.

4. Program Description: Describe the proposed program being requested and indicate exactly how it addresses the issues described in Question 2. Be specific on what direct services and activities will be provided with the HSG funds. Clearly outline the anticipated outcomes and cite the evidence on which the expectation is based.

Describe how, if awarded, this grant will enhance or increase services provided by your agency.

5.	Performance Measures: Identify the goals, objectives, and performance measures for the project. All objectives must be specific, measurable, achievable, relevant/realistic and time-based. Measures should describe how the project's outputs contribute to the attainment of each goal. Complete the Attachment A worksheet (instructions included on the Excel workbook tabs) indicating how the performance of the proposed strategy will be measured and monitored. Using this information fill in the left column of Attachment B.
	Please note: There are three (3) tabs to the Attachment A Excel worksheet.
6.	Current Year Initiatives (for current HSG grantees only): Describe the activities and outcomes of your FY2020 project and/or your current 2021 HSG funded project to date. Explain how project activities and accomplishments addressed the problem/critical needs supported with the grant(s). Specifically include the numbers served and how you are meeting/met your performance goals. Explain any program changes you have made or anticipate making to ensure your goals and expenditures are on target.
	If you were not funded in either FY2020 or FY2021 enter N/A.
7.	Collaboration: Describe any formal partnerships with other agencies or city departments that will collaborate in providing the requested services. Attach copies of the signed MOUs, agreements, or grants utilized for each cited partnership. (Not included in the 6-page limit) For homeless services applicants attach documentation clearly demonstrating the housing where program participants will reside while receiving services. Also, attach proof of your involvement in the SVHC - CoC.
8.	Sustainability: Describe how you will sustain the requested services beyond the one-year contract period. What is the plan for sustainability beyond this grant?

Budget & Financial Information

Project Budget: Complete this budget worksheet in full, detailing the proposed cost for each expense line (rounded to the nearest dollar). List your personnel and operating costs, including amounts for each type of expense (ex. staffing, materials, travel) to be charged, the amount requested from HSG, other sources of funding, any in-kind match dollars. Provide the total for each expense type and program total.

Use Attachment C (proposed project budget spreadsheet) to list each specific line-item expense. Also attach a narrative justification for each requested item demonstrating why it is essential/appropriate to the program.

Refer to the FY2022 Human Services Grant (HSG) RFP announcement for **allowable** and **unallowable** expenses.

Expense Type Description	HSG Requested Funds	Other Cash Support	In-Kind Match	Total Program Cost
TOTAL				

Itemize the types of other funding identified above to support the proposed program. **Include any Medicaid income that supports this proposed program.** The amounts listed below must match the 'Other Cash Support' and 'In-Kind Match' columns in the chart above.

Funding Source	Amount Requested	Amount Approved
Totals		

9. Business Organization and Credentials - please attach the following:

- **1.** Synopsis of your business qualifications to include, but not limited to, the business plan, service design philosophy, client support infrastructure.
- 2. Audited annual corporate financial statement for the three most recent fiscal years or other financial reference which demonstrates the organization's financial capacity.
- 3. Prior year Federal Income Tax Returns (Form 990, Form 990-EZ, or Form 990-PF).
- 4. On a separate page list any grant funding awarded to your agency by the City of Norfolk for services provided in FY2021 or for services to be provided in FY2022 (July 1, 2021 to June 30, 2022). Include the funding source (ESG, CDBG, HSG, Outside Agency, etc.); the amount awarded; type of services to be provided; and the target population to be served.

Final Application Checklist

- ✓ A pre-proposal "Zoom" Informational Video Conference Call for applicants will be held on Tuesday, June 08, 2021 at 10:00 a.m. To register, applicants must email the name of their representative and that person's email address to dana.vaughan@norfolk.gov by no later than June 04, 2021.
- ✓ Questions regarding the HSG application can be submitted to dana.vaughan@norfolk.gov between May 25, 2021 and June 10, 2021.
- ✓ Applications must be received by 4:30 PM on Thursday, June 24, 2021. Applications submitted after the deadline will be returned and will not be considered for funding.
- ✓ Applications must be saved as a Word or PDF document and emailed to:

Norfolk Department of Human Services Dana Vaughan, Business Manager <u>dana.vaughan@norfolk.gov</u>

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services projects only)

Completed General Information page
Answers to Program Specific Questions 1 through 8 (where applicable) – limited to six (6) pages - single spaced with 12-point text font and one-inch margins
 Budget Chart, Attachment C and the Budget Justification (not included in the six pages) Complete line item and other funding support details Brief justification describing the need for each line item as it relates to the proposal
Goals, Objectives and Performance Measures – Attachment A & B (not included in the six pages)
 Required attachments for all applicants (not included in the six pages) IRS designation of 501 status Prior fiscal year's operating budget of the applicant agency Business organization credentials - see page 5 of the application List of grant funding from the City of Norfolk for FY21 and FY22 - see page 5
Additional attachments as needed:
 Signed MOU's or collaboration agreements Documentation of participation with housing subsidy programs

Proof of participation in the Southeastern Virginia Homeless Coalition (homeless